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| <b>[8]</b>   |                                      |                                    | 0 / //1      |
|--|--------------------------------------|------------------------------------|--------------|
| Certificate of Mailing By "U.S   | . Express Mail" Under 37 C.F.R.      | 1.10(c)                            | 7 ·          |
| "EXPRESS MAIL" Mailing Label Number: EV 48642754   | 45 US Date of Deposit:               | 11/2/04                            |              |
| I hereby certify that this paper and/or fee is being deposited wi  | ith the United States Postal Service | ce "EXPRESS MAIL POST OFFICE       |              |
| TO ADDRESSEE" service under 37 C.F.R. 1.10 on the date in  | idicated above and is addressed to   | o Commissioner For Patents,        | 1            |
| Alexandria, VA 22313-1450.   |                                      |                                    |              |
| Name: Chris Yo   |                                      | Lada                               |              |
| <u> 12164</u>  |                                      | m 40 Caro                          |              |
| Signature Date   | S                                    | Signature                          | J            |
| IN THE UNITED STAT   | ES PATENT AND TRA                    | DEMARK OFFICE                      |              |
| A . A . A . A  | Attornou Dool                        | hat No. CADI DOOL                  |              |
| In re Application of: Korobkin, Carl P.  |                                      | ket No. CARL-P001                  |              |
| Serial No.: 09/344,814   |                                      | hang, Jon Carlton                  |              |
| Filed: 6/25/1999   |                                      | 623                                |              |
| For: Photogrammetry Engine For Model Constru   | ctions                               |                                    |              |
| Commissioner of Patents  |                                      |                                    |              |
| P.O. Box 1450  |                                      |                                    |              |
| Alexandria, VA 22313-1450  |                                      |                                    |              |
| AMENDM   | ENT TRANSMITTAL LE                   | ETTER                              |              |
| Dear Sir:  | •                                    |                                    |              |
| Deal on.   |                                      |                                    |              |
| 1. TRANSMITTED DOCUMENTS: the follow   | wing documents relating to           | the above-identified patent app    | lication are |
| being transmitted herewith.  |                                      |                                    |              |
|  | 15 nages                             |                                    |              |
| X a. An Amendment for this application:  |                                      |                                    |              |
| b. Substituted Formal Drawings:  |                                      | 107():                             |              |
| c. A Petition For Extension of Time For  |                                      |                                    |              |
| d. An Information Disclosure Statement   |                                      | ) <u>X</u> 1.97(c)                 |              |
| X e. A stamped, self-addressed, return post  | tcard.                               |                                    |              |
| b. Substituted Formal Drawings:  c. A Petition For Extension of Time For d. An Information Disclosure Statement X e. A stamped, self-addressed, return post X f. A Check (#_1184) for \$ |                                      | ed fees of this correspondence.    |              |
|  |                                      |                                    |              |
| 2. APPLICANT FILING STATUS:  |                                      |                                    |              |
| a. Applicant is a Large Entity.  |                                      |                                    |              |
| X b. Applicant is a Small Entity.  |                                      |                                    |              |
|  |                                      |                                    |              |
| 3. EXTENSION OF TIME:  |                                      |                                    |              |
| X a. Applicant petitions for an extension of   | f time under 37 C.F. R. 1.1          | 36 for the total number of mon     | ths checked  |
| below (fees pursuant to 37 C.F.R. 1.17   |                                      |                                    |              |
| Extension of Time  | Large Entity Fee                     | Small Entity Fee                   |              |
|  |                                      | V \$ 55.00                         |              |
| i. One (1) month.  | \$ 110.00                            | <u>X</u> \$ 55.00                  |              |
| ii. Two (2) month.   | \$ 430.00                            | \$ 215.00                          |              |
| iii. Three (3) month.  | \$ 980.00                            | \$ 490.00                          |              |
| iv. Four (4) month.  | \$ 1,530.00                          | \$ 765.00                          |              |
| v. Five (5) month.   | \$ 2,080.00                          | \$ 1040.00                         |              |
|  |                                      |                                    |              |
| Extension Time Fee Total: \$55.00  | <b>∴</b>                             |                                    |              |
| b. Applicant believes that no extension of ti  | me is required. However              | this conditional netition is being | made in      |
|  |                                      |                                    |              |
| case Applicant has inadvertently overloo   |                                      |                                    |              |
| hereby authorized to charge any necessar   |                                      | this communication or credit an    | y            |
| overpayment to Deposit Account No: 50  | <b>)0482</b> .                       |                                    |              |
|  |                                      |                                    |              |

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## 4. FEE CALCULATION:

The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| Fee Items  | Claims<br>Remaining After<br>Amendment    | Highest Number of Claims Previously Paid | Present<br>Extra Claims | Fee Rate   | Total  |
|--|---|--|-------------------------|--|--------|
| a. Total Claims  | 34  | - 40 =                                   | 0                       | x \$ 18.00 Large Entity<br>x \$ 9.00 Small Entity  | \$ .00 |
| b. Independent<br>Claims   | 3   | - 5=                                     | 0                       | x \$ 88.00 Large Entity<br>x \$ 44.00 Small Entity | \$ .00 |
| c. Multiple Dependent Claims Added By This Amendment x 300.00 Large Entity x 150.00 Small Entity |   |  |                         |  |        |
| d. Extension of T  | ime Fee Total, if any,                    | , from above EXTEN                       | ISION OF TIME           | E section 3a.                                      | \$ .00 |
|  | s Required With This for Information Disc |  |                         |  | \$ .00 |
| e. Total Fees  |   |  |                         | ·  | \$ .00 |

## 5. PAYMENT OF FEES

| The full fee due in connection with this communication is provided as fo | llows: |
|--|--------|
|--|--------|

|     | The Commissioner is hereby authorized to charge the fees associated with this communication or credit any overpayment to <b>Deposit Account No: 500482</b> . A <u>duplicate copy</u> of this authorization is enclosed.  |
|-----|--|
| _ X | A Check # 1184 for \$ 55.00 for the above specified Total Fee is enclosed. However, should Applicant inadvertently miscalculated the required fee, the Commissioner is hereby authorized to charge the necessary additional amount associated with this communication or credit any overpayment to <b>Deposit Account No: 500482</b> .               |
|     | Applicant does not believe that any payment of fee is needed in association with this communication. However, should Applicant inadvertently miscalculated the required fee, the Commissioner is hereby authorized to charge any necessary amount associated with this communication or credit any overpayment to <b>Deposit Account No:</b> 500482. |

Please direct all correspondence concerning the above-identified application to the following address:

**CUSTOMER NO: 22877** 

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Respectfully submitted,

DENNIS S. FERNANDEZ

Registration No. 34,160

11/2/04

Date